	Effective December 8, 2004 10/807-897											7
	CLAIMS AS FILED - PART I									-	-	
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	FOR			ABER FILED	NUMBER EXTRA	⊣	SICFEE	FEE 150.00	OR	FLATT BASIC F		
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.	MULTIPLE DE	PENDENT CLA	M PRESEN	r	Ö	7 -			OR	X200=	 	<u> </u>
ŀ	* If the differe	nce in column	1 is less the	ın zero, enter	"O" in column 2	نا ا	80⇒	<u> </u>		+360=		
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